

Section of Dermatology.

President—Dr. J. H. SEQUEIRA.

Case of Sarcoid.

By H. W. BARBER, M.B.

MRS. C., aged 57, consulted me (January 21, 1927) about an eruption on the face, of seven years' duration.

Family History.—Father died of "pleurisy," aged 45; mother died of "heart-failure."

Personal History.—Health as a child good; was born on and lived on a farm. When aged 33 had rheumatic fever; at 40 began to have recurrent attacks of erysipelas, accompanied by cervical adenitis. The last attack was seven years ago and the eruption on the face appeared after this.

Condition on Examination.—At first sight the eruption suggests lupus vulgaris, but on the left cheek are three raised bluish nodules, with vessels coursing over them, which are, I think, sarcoid nodules. On both cheeks are scattered patches of flat lupus-like nodules resembling those on the nose and left cheek of the patient in the case of lupus pernio which I have shown on two occasions (*Brit. Journ. Dermat. and Syph.*, vol. xxxvii, No. 3, March, 1925, p. 133, and *Proc. Roy. Soc. Med.*, vol. xx, No. 4, February, 1927, p. 347). These nodules, when tested with a sharpened match, are, perhaps, harder than those of true lupus, but had the large raised nodules not been present I should have diagnosed the case as one of lupus vulgaris.

The hands are bluish, but no nodules can be felt on them.

The physical signs in the heart are suggestive of an old rheumatic myocardial infection, but there is no evident valvular disease.

There are no physical signs indicative of active disease in the lungs.

X-ray Examination (Dr. Lindsay Locke).—Heart shadow, somewhat enlarged to the left. Diaphragm moves evenly and well. Costo-phrenic angles clear. Marked root shadows with many old calcified foci.

The bones of the feet show some increased translucency, but no clear spaces such as may be found in cases of sarcoid.

Von Pirquet Reactions (Dr. Eyre):—

<i>Bovine</i>			<i>Human</i>				
Per cent.			Per cent.				
64	+	+	...	...	64	+	+
16	±	...	...	...	16	±	...
4	<i>nil</i>	...	...	...	4	±	...
					1	<i>nil</i>	

For the past few weeks the patient has been taking iodine and thyroid internally, and receiving intramuscular injections of sodium morrhuate.

February 2, 1927.—There are symptoms and signs of excessive dosage of thyroid and iodine. Patient has had six injections of sodium morrhuate, and the flat nodules have softened and oozed, forming dry crusts on the surface. The appearances suggest that they are undergoing involution, presumably owing to the effect of the sodium morrhuate.